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PTO/S8/06 (0E-03) Approved for use through 773142005 (0840531-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Humber 0.953.0.35.6		
			Substitute	tor Form PTC	<i>J</i> -6/3					<u> </u>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR.	OTHER THAN SMALL ENTITY	
FOR MUNISER FILED MANGER EXTRA							R4TE	FEE		RATE	FEE
BASIC FEE QJ CFR 1.16(a))								s	OR.		1
TOTAL CLAIMS OF OFR 1,16(c))			entnes 20 s	· É	7	lt	x s		OR ·	xs •	
PADE	PENDENT CLAS	4S 1	•			1 †			OR	x s =	
### 1 mines 3 = 6							× 3				
MULTIPLE DEPENDENT CLAIM PRESENT (3: CFR 1.16(d))							+ 5		OR	+5•	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											
(Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL	
MA		CLASMS REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE :	ADD+ TIONAL FEE
Æ	Total CE CRR LN(C)	24	Minus	20	- 4	1 1	x s=		OR	x:/8=	72-00
AMENDMENT	(independent (SF OFR L.1404)	• 4	Minus	- 3	-0	1 1	x \$		OR	x:86-	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (ST OFR 1,16(d))					1 1			1		
- 1 Last Lasterinian of wertacting and the Countries (1)						J Ł	TOTAL		OR.	TOTAL	
							ADDIFEE		OR	ADDIFEE	L
		(Celuma 1)		(Cotiven 2)	(Cotumn 3)				. :		
AMENDMENT B	,	CILAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		FATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(d)	24	Minus	"14	.0		x \$=		OR	X 5	
	Independent psr CFR L-168-8	. 3	Minus	- 3	0	1	x s =		OR	x s=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAMA (27 CFR 1.16(41))					1 1	+4 . •		OR	+3 •	
							TOTAL .		OR	TOTAL ADD'S FEE	. 15
·							ADD'L FEE	<u></u>	: יייי נ	AUCHEE	
<u> </u>		(Cotumn 1)		(Column 2) HIGHEST	(Column 3)	i 1			7 !		
ENDMENT C		REMAINING AFTER AMENDMENT		NUMBER FREVIOUSLY PAID FOR	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE] :	RATE	ADOF TIONAL FEE
	्र Total (वर दम्म १.४६५व)	1. 14	Minus	14	0		x.s=`		OR	x se	. :
	Independent GF GFR 1,16019	. 3	Minus	- 3	· es	11	x s=		OR	x s=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					11	+5 •		OR .	+5. •	
						ן נ	TOTAL		┪ ¨;	TOTAL	1
	• If the entry in a	ootumn 1 is less th	on the entry	in column 2, wri	te "O" in column	n 3.	ADD'L FEE] oa	ADD'L FEE	L
	" If the "Highest	Number Previousi Number Previousi	y Paid For	IN THUS SPACE	is less then 20.), ent		•	•	•••	
		tumber Previously						the accroori	ate box in:	column 1.	

The "lighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate dox in toutient 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form antion suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Depondment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450. 2

If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.

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PTO/S9/06 (08-03) Approved for use through 7/31/2006, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information untess it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Doctor Number 09/53039 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY (Cotumn 2) OR SMALL ENTITY NUMBER FILED MUMBER EXTRA RATE FEE RATE BASIC FEE FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR X S = INDEPENDENT CLASHS (37 CFR 1.16(b)) minus 3 -OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR ' If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Cotumn 2) (Cotumn 3) OR SMALL ENTITY SMALL ENTITY CI AIMS HIGHEST REMAINING PRESENT NUMBER RATE ADOL ENT RATE ADDI-AFTER PREVIOUSLY EXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE FEE ENDM Total (07 CFR 1.16(4) X S = OR X S 8 Independent G7 CFR 1,1600 3 ¥ 4 OR X S . FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (AF CFR 1.16(d)) = OR + 5 TOTAL ADD'L FEE OR ADD'L FEE (Cotumn 1) (Column 2) (Cotumn 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDI-TIONAL RATE RATE AFTER PREVIOUSLY ADDL. **EXTRA** TIONAL AMENDMENT PAID FOR W FEE Total (27 CFR L1843) FEE ENDM Minus X S OR X S Minus OR X E FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (N7 CFR 1.15(d)) + : OR = TOTAL ADO'L FEE OR ADD'L FEE (Cotumn 2) (Column 1) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI RATE AFTER PREVIOUSLY EXTRA TIONAL TIONAL MENDMENT **PAID FOR** FEE Total profesions ENDMI Minus X,S OR X S Minus = OR = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (D7 CFR 1.16(d)) OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column t

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